



Dana E. Blackwell
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LOS ANGELES COUNTY COMMISSION FOR CHILDREN AND FAMILIES

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REV. CECIL L. MURRAY
SANDRA RUDNICK
ADELINA SORKIN, LCSW/ACSW
DR. HARRIETTE F. WILLIAMS, CHAIR
STACEY F. WINKLER

APPROVED MINUTES

The General Meeting of the Commission for Children and Families was held on Monday, **August 1, 2005**, in room 140 of the Kenneth Hahn Hall of Administration, 500 West Temple Street, Los Angeles. **Please note that these minutes are intended as a summary and not as a verbatim transcription of events at this meeting.**

COMMISSIONERS PRESENT (Quorum Established)

Joyce Fahey
Ann Franzen
Dr. La-Doris McClaney
Rev. Cecil L. Murray
Sandra Rudnick
Adelina Sorkin
Dr. Harriette F. Williams
Stacey F. Winkler

COMMISSIONERS ABSENT (Excused/Unexcused)

Carol O. Biondi
Patricia Curry
Helen Kleinberg
Daisy Ma

APPROVAL OF THE AGENDA

The agenda for the August 1, 2005, meeting was unanimously approved as amended.

APPROVAL OF MINUTES

The minutes of the July 18, 2005, general meeting were unanimously approved.

CHAIR'S REPORT

- The Education Coordinating Council met last week and discussed a residential academy model and ideas for coordinating enrichment programs during non-school hours for foster and probation youth. Supervisor Michael Antonovich opened the meeting with remarks, and José Huizar, president of the school board of the Los Angeles Unified School District, served as chair.
- A handout of the August meeting calendar was distributed. Chair Williams reviewed the individual coverage for those meetings, and encouraged all Commissioners to attend any in which they are interested.
- All Commissioners are also welcome at the chairs' meetings. One was held this morning and another is scheduled for 8:30 a.m. on August 15 to strategize for the \$250 million per year in mental health funds available from the passage of Proposition 63, the Mental Health Services Act. Commissioners are looking forward to visiting with the Board of Supervisors and their deputies on this matter.
- Supervisor Antonovich is hosting the annual All For the Love of Kids event on August 18.
- The scheduled report on the medical HUBs and the D Rate Unit has been postponed because of the funeral of a regional administrator's young daughter.
- Prior to last year's election of Commission officers, the Commission bylaws were amended to allow up to three vice chairs. This year's elections are scheduled for September 19, and a decision must be made prior to that time as to whether Commissioner Fahey, as chair of the election process, should solicit candidates for two vice chair positions or three. **Commissioner McClanney moved that the Commission elect two vice chairs this year; Commissioner Sorkin seconded the motion, and it was unanimously approved.**
- Chair Williams welcomed Angela Carter, attending today in place of Dr. David Sanders. Ms. Carter reported that the first phase of redeployment for clerical staff, which focused on getting worker-to-clerical staff ratios evened out among offices, has been completed. For the second phase, a consultant has been retained to help identify a workload yardstick for clerical staff, similar to that developed for social workers.

JUVENILE COURT UPDATE

Judge Michael Nash reported on a vibrant and active court system, with a plan for improving services being gradually implemented. He and Dr. Sanders meet almost weekly and have agreed to focus on making the courthouse a training center, since a mere distribution of materials on new departmental initiatives is not enough. Brown-bag training sessions have recently addressed more efficient forms for Regional Center referrals

(designed by a multi-agency committee) and a panel of pro bono advocates who represent children with educational issues (a partnership with Public Counsel, the Alliance for Children's Rights, and others). Another partnership, this time with the Bar Association,

seeks representation for children who are injured while in the system so they may seek redress for their injuries.

As presiding judge, Judge Nash has formed between 15 and 20 groups to involve judicial officers in addressing various issues, and he knows that many more are needed. Existing groups include committees that are:

- Working on the implementation of the Indian Child Welfare Act in both the dependency and delinquency courts;
- Partnering with the Child Welfare League of America, beginning later this month, to develop a dual-status system for dependency/delinquency children (as allowed by AB 129);
- Developing visitation guidelines that are expected by the end of the year;
- Addressing education issues and participating in the Education Coordinating Council, which is creating a blueprint for improving educational outcomes for foster and probation youth;
- Working with stakeholders on health issues, including the department's new medical HUBs;
- Exploring housing issues for dependency youth, including the possibility of stationing a Housing Authority representative at the courthouse, and considering how inadequate housing may be preventing families from reunifying;
- Looking at barriers to permanency and getting consensus on ways to achieve permanency in the system;
- Monitoring the use of psychotropic medication, modifying the form requesting medication to include more information, and revamping the request notification process;
- With representatives from the family law court, reworking local rules on confidentiality that will make access to records, proceedings, and children more workable.

The court holds periodic dependency forums, and its multi-agency committee meets monthly.

Projects that Judge Nash envisions for the future include:

- Working with Dr. Sanders and other stakeholders to seek a grant for developing protocols—to be used by all 20 courts, rather than in a single 'drug court' model—for treating parents with substance abuse issues;
- Reviewing each of the resource guidelines published by the National Council of Juvenile and Family Court Judges (a manual of best practices in child abuse/neglect cases) for anything that might improve Los Angeles County's system;
- Reviewing the National Council's similar guidelines for delinquency courts, newly released.

Commissioner Murray asked about the treatment focus for substance-abusing parents, and Judge Nash said that any protocol would use a team concept for treatment, involving the court, attorneys, social workers, treatment providers, and others. The process would offer parents a chance to help themselves as individuals and help them keep their families together. Some jurisdictions have created a boutique ‘drug court’ model, but Judge Nash prefers that protocols be used systemwide. The committee will be exploring models in use in other parts of the country.

Commissioner Sorkin commended the much-needed work that the multi-agency committee has done with Regional Centers, and also mentioned that panel attorneys, though invited, have not attended the visitation committee, and parents are not represented. Judge Nash said that the administrative office of the courts has taken over the management of payment for court-appointed counsel in the dependency court, a substantial expense paid by the state. The Children’s Law Center is currently going through a consolidation process that should improve the way it represents children, but consistent, effective advocacy for parents has always been lacking. An RFP is currently being drafted to create a cohesive entity to represent parents and address accountability, training, and resource issues. Judge Nash hopes it will be released within the next 18 months.

Commissioner Rudnick thanked Judge Nash for his stance on child health and psychotropic medication, urging solid oversight when drugs are prescribed, since they can be very dangerous for children. Judge Nash said that the department plans to involve public health nurses in oversight, and is studying how to link with other stakeholders as well.

Chair Williams praised Judge Nash’s personal involvement in important issues and his cooperation with the department. She asked if the new permanency committee is working with private partnerships on fast-track adoptions. Judge Nash urges a focus on permanency at every hearing, acknowledging that no consistent way currently exists of deciding on legal guardianship or other forms of permanency planning. Although things have improved, the system still has a long way to go. The lag between a termination of parental rights and adoption completion, for instance, has fallen from the 20 to 22 months it took two years ago, but Judge Nash would like to see the time decrease to no more than six months in most cases. The department’s switch to a consolidated home study—where families are certified as foster parents and adoptive parents at the same time—has helped speed things up, as has the implementation of concurrent planning for the two tracks of adoption and reunification. Cases need not wait for a six-month hearing, Judge Nash said, but may come before the court at any time. The idea of three-month reports has been met with resistance in the past, but he would be happy to do them on a weekly basis so that cases can be monitored closely.

Chair Williams encouraged new Commission members to visit the court, especially on an Adoption Saturday. This year, Judge Nash is encouraging events like that on weekdays, too, and in fact finalized over 150 adoptions last Friday afternoon. The court will continue to participate in the national Adoption Saturday in November.

INTAKE RECEIVING CENTER CONCEPT

Joi Russell presented the concept paper for Intake Receiving Centers (IRCs) developed by representatives from the department, local child-serving agencies, local hospitals, and the firm that helped implement a similar model in Contra Costa County. If the initiative is adopted, IRCs will be located near the medical HUBs and provide children with short-term care and supervision, crisis support, and a child-friendly setting during the time social workers are locating suitable placements. IRC staff will also transport children to and from their medical assessments at the HUBs, thus providing continuity of care.

Between 700 and 800 phone calls are received each day about suspected child abuse, 40 percent from schools. If an Emergency Response worker detains a child, the youngster can spend hours waiting in a regional office while a relative or other appropriate placement is sought. Time constraints often force placements that are not best for the long term, and siblings are often separated.

IRCs would provide a safe and supervised setting where the child can remain for up to 23 hours while relatives are located or an appropriate long-term placement, close to friends and school, is arranged. While there, children can sleep, bathe, play, have a meal, and be medically assessed without the further trauma of moving from placement to placement or waiting an extended time at a hospital to be examined. IRCs will eliminate the problem of children spending hours at the command post, decrease the number of expensive hospital stays (when children are kept there only because no placement has been found, not for medical reasons), and reduce social worker and command post overtime. The team decision-making approach used at the IRCs will be less anxiety-provoking for parents than appearing at department offices. Placement decisions will be informed by the results of the medical assessment, and more time can be spent finding relatives or extended-family members who will take sibling groups, making those separations less likely.

Contra Costa County has implemented the IRC model for several years with great success; its three facilities serve only about 2,000 children, however, while Los Angeles County may serve as many as 38,000. Neither the Board of Supervisors nor the public is going to accept children continuing to spend nights at the command post, Chair Williams said, and she encouraged the Commission to take an in-depth look at the proposal.

The next medical HUB scheduled to open is Harbor/UCLA in SPA 8, serving the Lakewood and Torrance DCFS offices. Ms. Russell's group proposes establishing an IRC in that area, concurrent with the HUB's opening, and testing the concept. Because of the HUB link, IRCs will at first handle only initial detentions, not group home residents being given seven-day notices, for example.

Commissioner Sorkin queried the disposition of the Paramount site, which was earmarked to be opened as a reception center with funds from the closed MacLaren Children's Center. She also asked why the group's proposal suggested piloting the IRCs in SPA 8, when the greatest need is in SPAs 6, 4, and 3. Ms. Russell explained that when medical HUBs become functional, IRCs would be established along with them. Rather

than needing to build centers from scratch, providers would likely already have existing facilities, along with a list of other requirements to be specified in an RFP.

Commissioner Winkler expressed her worry that the IRCs would be used as a convenient drop-off place, taking the onus off social workers to find appropriate placements right away. About 95 percent of children are placed by Emergency Response workers before nightfall on the day they are detained, Ms. Russell said, but the IRCs will ensure two things: that those placements are the most appropriate ones possible, and that children are medically assessed right away, so that evidence of abuse is not missed. For the children's sake, assuring the fewest number of placements within the first 48 hours of detention is critical. If no placement can be located in 23 hours, the command post would be notified and a placement found that way.

Two and a half years ago, Commissioner Sorkin accompanied Russ Carr on a visit to Contra Costa County to examine its facilities; a representative of the Association of Community Human Service Agencies reported that Mr. Carr's report was integrated into the materials the group studied. (The medical HUB system for child assessment was not in place at that time, which is why the realization of the concept was delayed.) During her visit, Commissioner Sorkin learned that children are sometimes simply transferred between reception centers when their 23-hour windows run out. In some circumstances, especially with sibling groups, 23 hours is just not enough time to find the best placement, Commissioner Fahey said, and some flexibility should be built in—though not enough so that extensions become routine. The stay at MacLaren Children's Center was supposed to be limited to 15 days, but it became all but permanent housing for some.

The 23-hour limit is a licensing issue, not one of placement, since the county was required to give up its shelter license at MacLaren as part of the Katie A. settlement. If group home providers are awarded IRC contracts, they may already have appropriate licenses in place, though the intent is to involve many different kinds of facilities. The committee may revisit the 23-hour structure in the future, possibly extending it to 72 hours, though that would require a different kind of license.

Commissioner Winkler said that the IRCs seem like a good notion, but she questioned the start-up of a new initiative when the system can't maintain, for instance, a centralized computer system to provide information on where children are, what they need, and if they have been assessed. Whether the IRCs will have laptops for social workers to use seems like putting the cart before the horse.

The concept paper is meant to explore the IRC idea, Ms. Russell said, and the committee knows that many nuts-and-bolts questions will need to be resolved. A pilot implementation, too, will undoubtedly reveal unexpected bugs. She believes the concept can work, however, and that it would be an improvement on the system—or lack thereof—currently in place. Chair Williams expressed appreciation for the committee's work, and Ms. Russell thanked Commissioners for their questions and offered to update them again when plans were more solidified.

Angela Carter will prepare a report on the disposition of the MacLaren Children's Center funds for Commissioners, including specific information on the Paramount site. Chair Williams also asked for the children's budget documentation for 2003–2004, and for 2004–2005 when it is available.

PROVIDING SAFE AND STABLE FAMILIES RFP UPDATE

Walter Chan presented the Board letter requesting approval of the contracts for promoting safe and stable families, along with the lists of providers. The department released the RFP in March and received 224 proposals for family preservation and family support services, plus the new category of adoption promotion and support.

Initially, 81 proposals were selected. After looking at gaps in the community's ability to address additional trends in high-need areas, the department identified another 13 proposals that would use new county dollars to provide family preservation and family support services. The Board of Supervisors (BOS) approved those 94 contracts in late July with an effective date of August 1. Because agencies new to the process may still need to establish operational offices in the area for which they applied, the BOS gave Dr. Sanders the delegated authority to execute these contracts when all appropriate staffing and documentation has been verified.

An amendment to the Board letter asked the department to look at specific communities and their unique needs, and work with the Chief Administrative Office to find additional family preservation dollars. The special services fund in this year's departmental budget will be the source of these monies, but they are limited.

Commissioner Sorkin asked about the uneven distribution of provider agencies in certain SPAs, and Mr. Chan explained that contracts are tied to the boundaries of the department's regional offices; agencies must be able to provide services throughout those regions, no matter where their operational office is located. Dollar allocations were made by looking at historical caseloads in each region and at intake referral trends. For the two countywide contracts, referrals are centralized through program management staff. The Chinatown Service Center offers Asian-language services and United American Indian Involvement has extensive knowledge of the Indian Child Welfare Act to share with the population it serves.

PUBLIC COMMENT

There was no request for public comment.

MEETING ADJOURNED